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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: P. Loges, et al. Confirmation No.: 6665
Serial No: 10/074,188 Group Art Unit: 3742
Filing Date: February 12, 2002 Examiner: Fastovsky, Leonid M.
Title: **FILAMENT FOR RADIATION SOURCE**
Docket No: 56326-041 (IOPL-119)

CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. § 1.8(a)

I hereby certify that this correspondence is being facsimile transmitted to Technology Center 3700 of the U.S. Patent and Trademark Office (Fax No. 703-872-9306) on February 2, 2005.


Jeff Miller

Via Facsimile 703-872-9302
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT C

Sir:

In response to the Office Action mailed September 20, 2004, and the Office Action mailed November 7, 2003, and the Notice of Non-Compliance Amendment mailed January 19, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

BST99 1437489-1.056326.0041

02/22/2005

00000001

1

2202

\$25.00 02/03/2005

DA 501133

2202-\$25

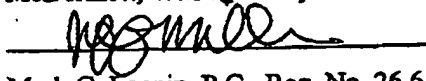
Serial No.: 10/074,188
Examiner: Fastovsky, Leonid M.
Art Unit: 3742

No fee is believed to be required; however, if a fee is required, or otherwise necessary to cover any deficiency in fees already paid, authorization is hereby given to charge our deposit account no. 50-1133.

Respectfully submitted,

McDermott, Will & Emery

Date: February 2, 2005


Mark G. Lappin, P.C., Reg. No. 26,618
Jeffrey J. Miller, Reg. No. 39,773
Attorneys for Applicants
28 State Street
Boston, MA 02109-1775
Telephone: (617) 535-4000
Facsimile: (617) 535-3800

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/074/188
(6072-24102-119)

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|---------------|--------------|
| TOTAL CLAIMS | 30 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 30 minus 20 = | 10 |
| INDEPENDENT CLAIMS | 1 minus 3 = | 4 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 28 | Minus = 30 | |
| Independent | 1 | Minus = 3 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

12/8/04

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 26 | Minus = 28 | 2 |
| Independent | 1 | Minus = 3 | 2 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

2/3/15

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 29 | Minus = 28 | 1 |
| Independent | 1 | Minus = 3 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE | FEE | OR | RATE | FEE |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| X\$ 9= | 90 | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL | 460 | OR | TOTAL | |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE | OR | RATE | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9= | | OR | X\$18= | |
| X42= | | OR | X84= | |
| +140= | | OR | +280= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9= | 25.00 |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | 25.00 |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.